

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL		Application No.	09/358,321
		Filing Date	07/21/1999
		First Named Inventor	Kitsiri Sukhapinda
		Group Art Unit	1636
		Examiner Name	Collins, Cynthia E.
		Attorney Docket No.	50,447
		Express Mail Label No.	sent via fax

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application. Note: 37 CFR §1.114 is effective on May 29, 2000. If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 CFR §1.53(d) instead of a RCE to be eligible for the patent term adjustment provisions of the AIPA.

1. Submission required under 37 CFR §1.114

a. Previously submitted

i. ☐ Consider the amendment(s)/reply under 37 CFR §1.118 previously filed on _____
(any unentered amendment(s) referred to above will be entered)

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

iii. ☐ Other: _____

b. Enclosed

i. ☒ Amendment/Reply

ii. ☐ Affidavit(s)/Declaration(s)

iii. ☐ Information Disclosure Statement (IDS)

iv. ☐ Other: _____

2. Miscellaneous

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR §1.17(f) required)

b. ☐ Other: _____

3. Fees (The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.)

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No. 04-1529

i. ☒ RCE fee of \$770.00 required under 37 CFR §1.17

ii. ☒ Three month extension of time fee of \$950.00 (37 CFR §§ 1.136 and 1.17)

iii. ☐ Other: _____

b. ☐ Check in the amount of \$ _____ enclosed

c. ☐ Payment by credit card (Form PTO-2036 enclosed)

NEW CORRESPONDENCE ADDRESS

☒ Customer Number 25212 or ☐ Correspondence address below

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SIGNATURE OF ATTORNEY/AGENT REQUIRED

SIGNATURE _____

NAME Ronald S. Maciak

REGISTRATION NO. 35,262

DATE December 2, 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent & Trademark Office on: (703) 872-8306

NAME Marcia R. Jansen

SIGNATURE _____ DATE December 2, 2003

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01 FC:1801 770.00 DA

02 FC:1253 950.00 DA